

PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-876

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application of Docked Number

APPLICATION AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEES (\$)	RATE (\$)	FEES (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))						
SEARCH FEE (37 CFR 1.16(n), (l), or (m))						
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))						
TOTAL CLAIMS (37 CFR 1.16(l))	minus 20 =	*	X	=	X	=
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*	X	=	X	=
APPLICATION SIZE FEE (37 CFR 1.16(u))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(b)(1)(G) and 37 CFR 1.16(s)					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						
* If the difference in column 1 is less than zero, enter "0" in column 2			TOTAL		TOTAL	

* If the difference in column 1 is less than zero, enter '0' in column 2.

• If the difference in column 1 is less than zero, enter '0' in column 2

191A

101A

APPLICATION AS AMENDED - PART II

AMENDMENT AS AMENDED - PART II		CORRECTION		(Column 3)	
(Column 1)		(Column 2)		(Column 3)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(d))	47	Minus	47	=
Independent (37 CFR 1.16(d))	30	Minus	6	=	
Application Size Fee (37 CFR 1.16(s))					
FIRST PRESENTATION OF MULTIPLE INDEPENDENT CLAIMS (37 CFR 1.16(s))					

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SMALL ENTITY

(Column 1)		(Column 2)		(Column 3)	
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
AMENDMENT 8	Total		M-12	**	1
	(37 CFR 1.16(e))				
Independent		Claims	***	2	
(37 CFR 1.16(e))					
Application Size Fee (37 CFR 1.16(s)).					
FIRST PRESENTATION OF MULTIPLE INDEPENDENT CLAIMS					

ANSWER

- If the entry in column 1 is less than the entry in column 2, write 1 in column 1.
- If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 1, enter 1.
- If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 2, enter 2.

10-12-
444-444

3-36
MURKIN

ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450